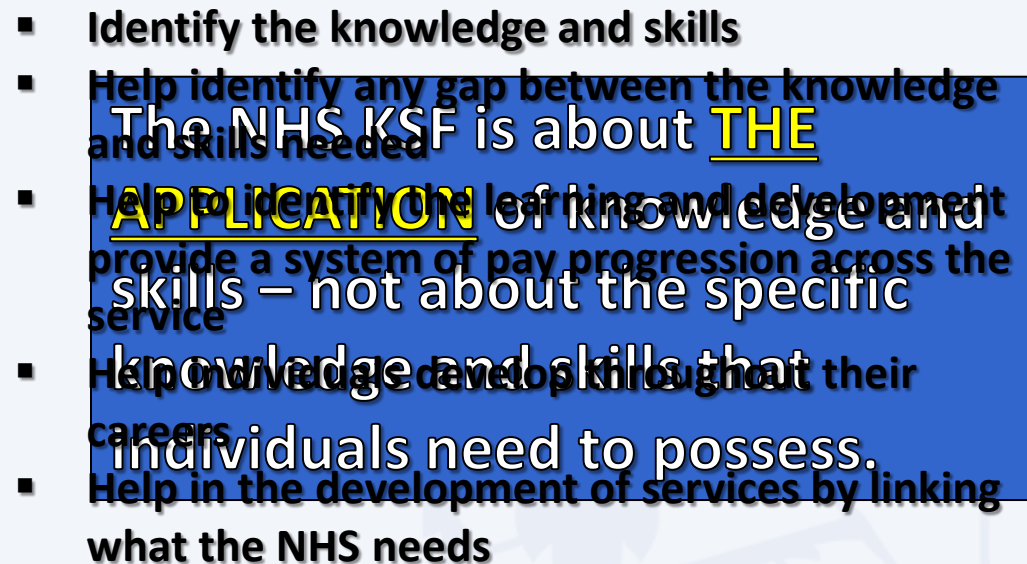


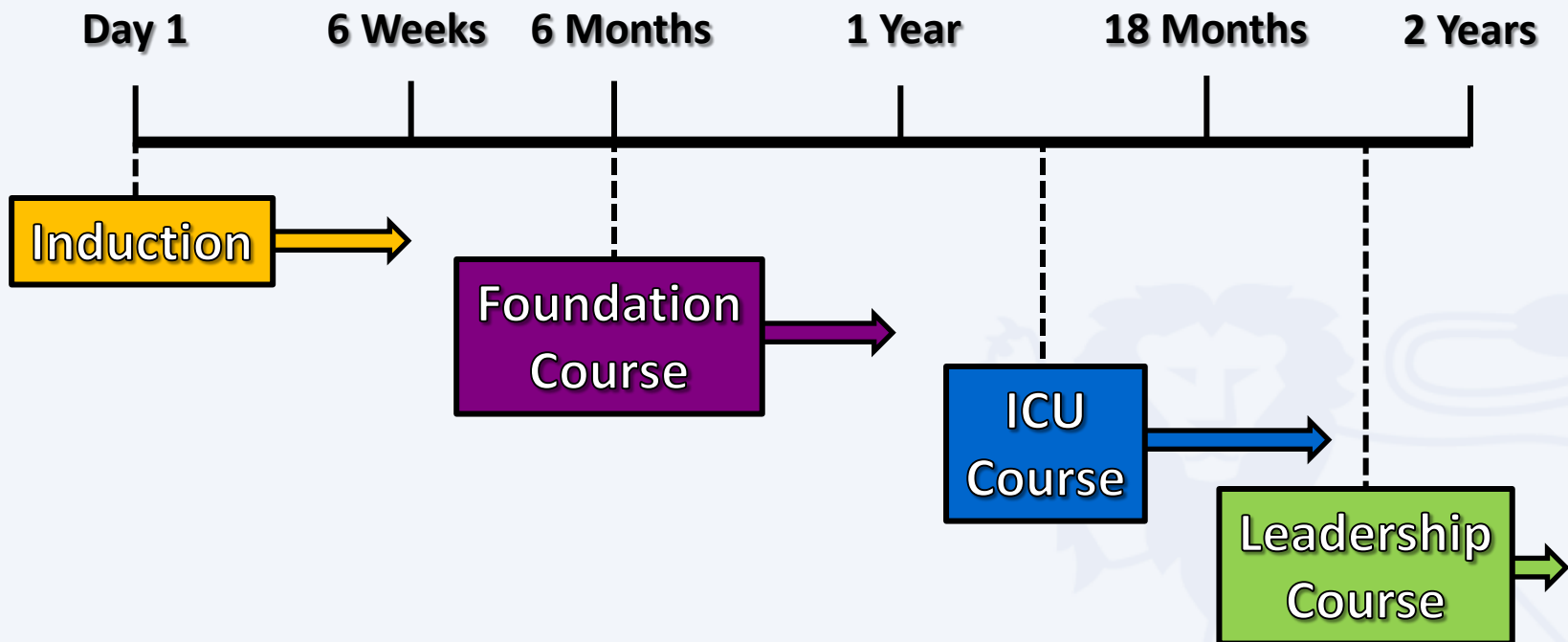
Assessing Performance in Critical Care Nursing Practice Using Benner's Novice to Expert Model: A Pilot Study

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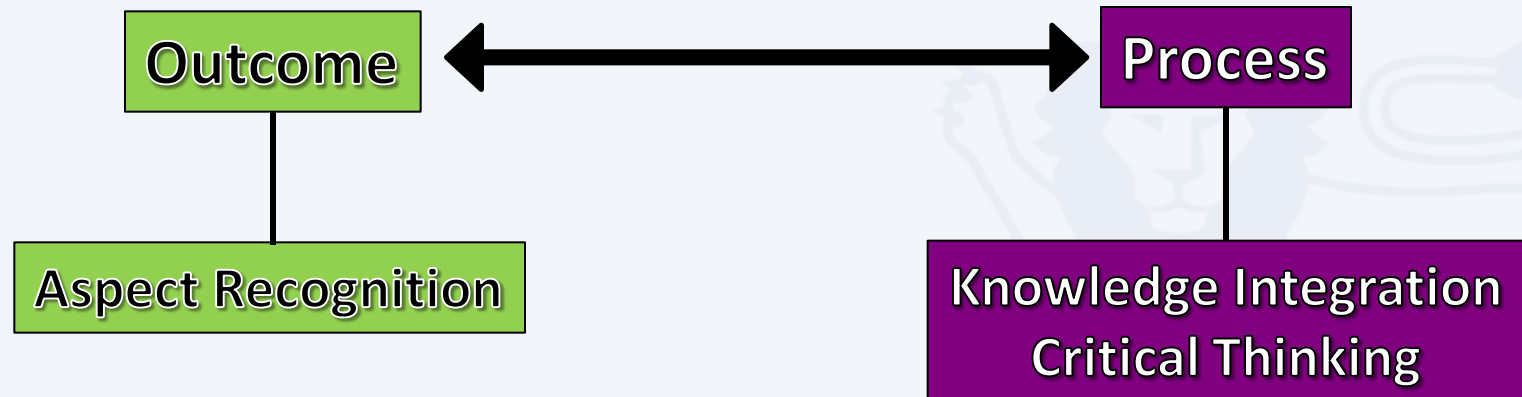
Knowledge & Skills Development



Competence ^{vs} Performance

**Competence is concerned
with perceived skills**

**Performance as actual
situated behaviour**



The Research

- **Participant observation.**
- **Each nurse supported over a morning shift (4-5 hours)**
- **Assessed by a minimum of 2 members from the education team.**
- **Inter-rater reliability assessed and analysed using Cohen's Kappa:**
 - **Overall Performance**
 - **Advanced Beginner Performance**
 - **Competent Practitioner Performance**

Defining Parameters of Practice

ADVANCED BEGINNER (AB)

Advanced Beginners demonstrate marginally acceptable performance and are able to relate the current situation to prior experience in a meaningful way. They are capable of recognising overall global aspects of a situation based upon prior learning.

COMPETENT PRACTITIONER (CP)

Competent Practitioners are consciously aware of the long-term effects of their actions. They are able to plan the most satisfactory outcome of the situation and take the appropriate action to achieve the planned aims. This requires conscious, abstract, analytical contemplation of the problem.

The Advanced Beginner

The Nurse is able to:

- AB-1 Know which rules, policies, procedures, information or customs apply in this setting.**
- AB-2 Demonstrate a degree of flexibility in her/his performance and interpretation of the rules to meet the needs of the situation; maintaining throughout the safety of the client, colleagues, others and self.**
- AB-3 Accepts prompting in good faith.**
- AB-4 Observes, and most of the time responds to the changing needs of the client, colleagues and the situation.**

The Competent Practitioner

The Nurse is able to:

- CP-1 Discriminate and choose which rules, policies, procedures, information or customs apply within situations.**
- CP-2 Anticipate outcomes and gives explanations for the interpretations made and the interventions used.**
- CP-3 Observes and responds to the changing needs of the client, colleague and the situation.**

Performance Measurement

Advanced Beginner

50%

Competent Practitioner

	0	1	2	3	4	5
AB1						
AB2						
AB3						
AB4						

	0	1	2	3	4	5
CP1						
CP2						
CP3						

Assessing Who?

Anyone could be nominated from any team

**Inclusion: those Pre- Foundation to Post ICU Course
: those who had been on the unit longer than 6 months**

Exclusion: those nurses being performance managed

Participants

The Pilot: Total N° 15

- **5 Pre-Foundation Course**
- **3 Foundation Course**
- **5 Post Foundation**
- **2 ICU Course**

Written feedback given to Nurse, Senior Nurse & Education Team



The Results

Any κ values:

- There was excellent agreement between the two raters as to the level of overall performance ($\kappa = 0.88$)
 > 0.80 were defined as excellent agreement,
 $0.61 - 0.80$ as good agreement,
- There was good agreement as to the advanced beginner performance indicators ($\kappa = 0.71$)
 $0.41 - 0.60$ as moderate agreement,
 $0.21 - 0.40$ as fair agreement, and
- There was fair agreement as to the competent practitioner performance indicators ($\kappa = 0.34$)
 < 0.20 as poor agreement.

Chi-squared was performed to determine the relationship between overall performance, AB and CP

Findings

The Induction & Foundation Programmes met the needs of the Advanced Beginner in terms of knowledge and skill acquisition and performance.

The ICU Course did not because it:

- **Didn't keep pace with the changing needs of critical care nursing practice.**
- **Used inappropriate non-expert teachers.**
- **Releasing ICU staff to attend**

Limitations

- **Small sample size**
- **Institutional context – safe practitioners**
- **Observer reliability and validity**
- **Meeting patient need/demand**
- **Education vs patient care**



Participant Feedback

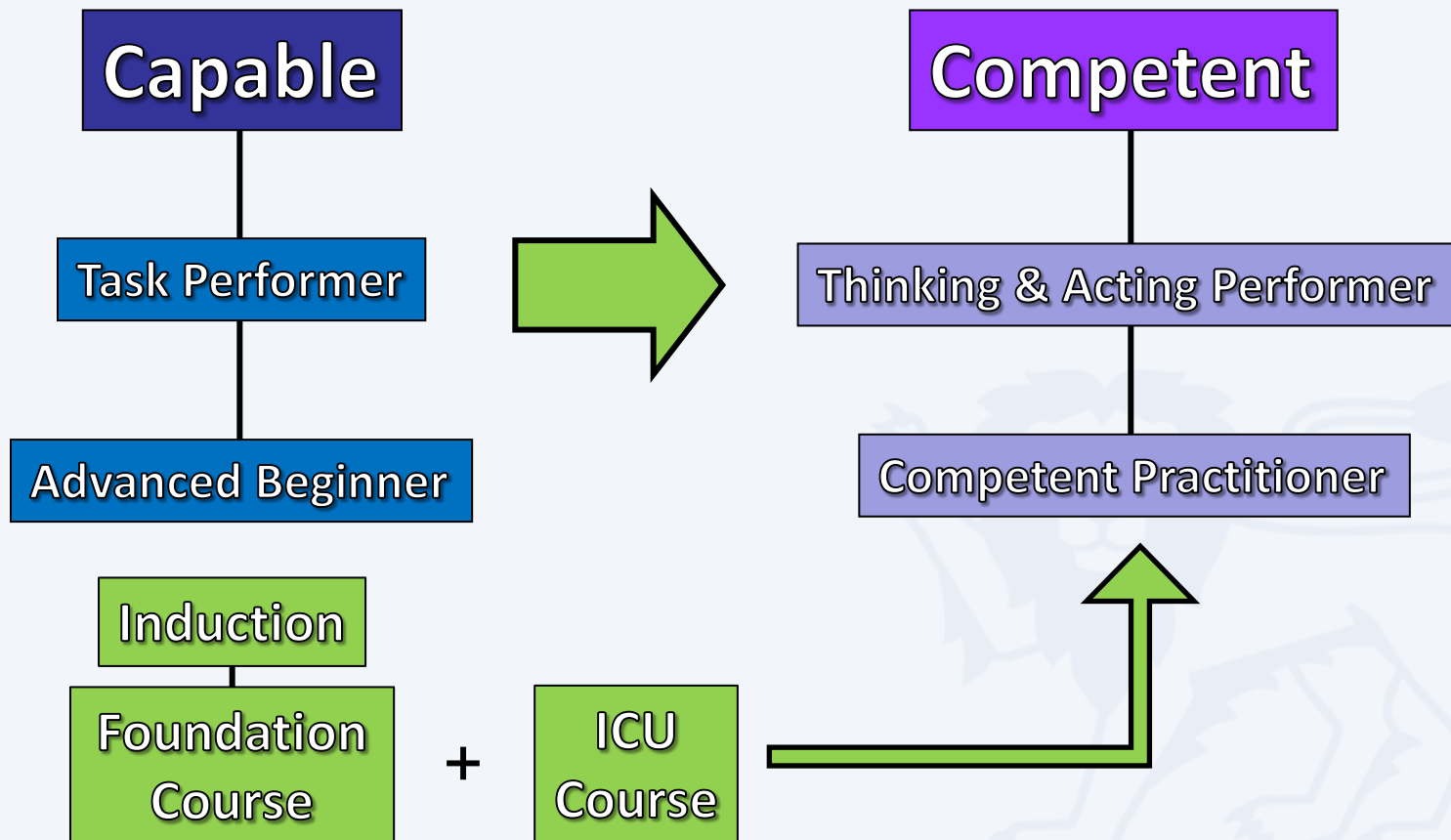
POSITIVE!!!!!!

- Empowered.
- Identified learning needs.
- Development of clinical assessment skills.
- Identified milestones in their development.
- Preparation for Foundation & ICU course.
- Acknowledgement of their knowledge and skills.
- Reinforced previous knowledge & experience.

The Challenges

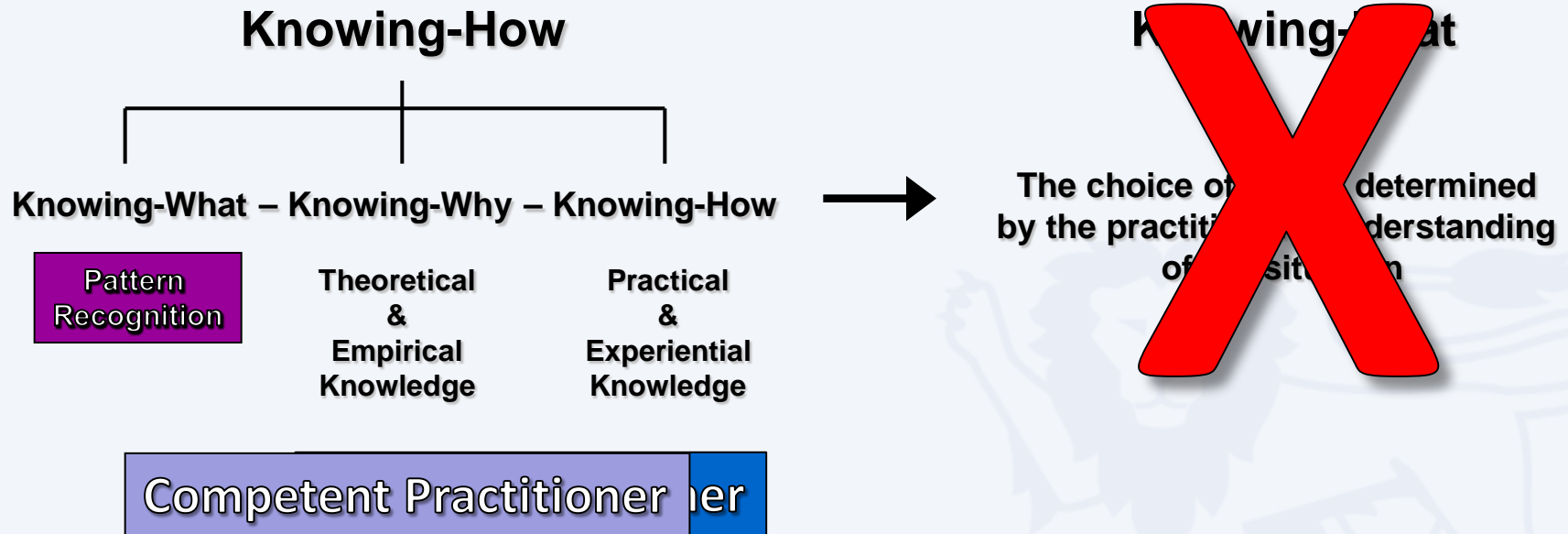
- Still see nursing care as a tasks to be done.
- Cannot make explicit the practice theory link.
- Dominated by the other professions.
- Disempowered.
- Over estimate level of competence.
- Overly task driven environment -
“the emphasis was to get things done”

Capable & Competent



Knowing That

(Christensen 2011)



The Way Forward

- Larger project to evaluate effectiveness.
- Preliminary work in Medical HDU proving beneficial.
- Fed back into education team.
- Forms part of the PDP.
- Identify future learning & education streams.
- Address concerns over the quality of the ICU course
 - In-House programme with local HEI accreditation
 - ❑ Cost effective
 - ❑ Tailor education to the specifics of unit need